

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

ADDRESS (number and street) ▼

7000 Cardinal Place

☐ Check if different than previously reported. (ACC)

Dublin

OH

43017

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00332833

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☒ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Cassi Baker

Signature of Treasurer

Cassi Baker

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
07 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2015</span>		<span style="border: 1px solid black; padding: 2px;">172227.12</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">123108.96</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">38693.24</span>	<span style="border: 1px solid black; padding: 2px;">199622.42</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">161802.20</span>	<span style="border: 1px solid black; padding: 2px;">371849.54</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">34500.00</span>	<span style="border: 1px solid black; padding: 2px;">244547.34</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">127302.20</span>	<span style="border: 1px solid black; padding: 2px;">127302.20</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		0	1		2	0	1	5		

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		3	1		2	0	1	5		

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	33737.78	119261.28
(ii) Unitemized .....	4937.98	80237.71
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	38675.76	199498.99
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	38675.76	199498.99
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	17.48	123.43
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	38693.24	199622.42
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	38693.24	199622.42

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	31500.00	180000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	15.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	15.00
29. Other Disbursements .....	3000.00	64532.34
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	34500.00	244547.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	34500.00	244547.34

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	38675.76	199498.99
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	15.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	38675.76	199483.99
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	0.00	0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 124  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Ola M Snow**

Mailing Address 267 Donerail Ave

City	State	Zip Code
Powell	OH	43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, HR Bus Partner Medical

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2015

**Transaction ID : PR100553418328**

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Rosemary Pitts**

Mailing Address 8673 Finlarig Dr.

City	State	Zip Code
Dublin	OH	43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Strategic Plng/Execution

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2015

**Transaction ID : PR118725318328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Ronald J Clerico**

Mailing Address 485 Trillium Drive

City	State	Zip Code
Galloway	OH	43119

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Marketing Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2015

**Transaction ID : PR118725418328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

321.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 124

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. Mary L Hamlin

Mailing Address 308 Ashley Ct

City

Washington

State

MO

Zip Code

63090

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Territory Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2015

Transaction ID : PR120659518328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Katherine Ballay

Mailing Address 7531 Bardston Drive

City

Dublin

State

OH

Zip Code

43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Comm Business Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2015

Transaction ID : PR120659618328

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Kevin Williamson

Mailing Address 3155 Victoria Drive

City

Alpine

State

CA

Zip Code

91901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Exec, Territory Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2015

Transaction ID : PR120659818328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

174.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 124

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. William C Putnam**

Mailing Address 7812 W. 147th Terrace

City

Overland Park

State

KS

Zip Code

66223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Scientific Consulting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR120659918328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. FRANCISCO J NEGRON SEGARRA**

Mailing Address CALLE 4, E-13

URB. VILLA MERCEDEZ

City

GUAYNABO

State

PR

Zip Code

00971-9314

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR120660018328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Lori J Roepken**

Mailing Address 1402 Wheeler Dr

City

Mansfield

State

TX

Zip Code

76063

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Mgr, Inventory Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR120669718328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

228.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. Therese Grossi**

Mailing Address 17211 Willow Rdge CT

City State Zip Code  
 Northville MI 48168

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 SVP, Enterprise Contracting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

07 / 31 / 2015

Transaction ID : PR120669818328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. Timothy W House**

Mailing Address 5920 Gainey Court

City State Zip Code  
 Westerville OH 43082

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 Dir, Account Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

07 / 31 / 2015

Transaction ID : PR120669918328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. Tiffany P Olson**

Mailing Address 15402 Hidden Oaks Lane

City State Zip Code  
 Carmel IN 46033

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 President, Nuclear Pharmacy Serv

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3076.80

Date of Receipt

07 / 31 / 2015

Transaction ID : PR120670118328

Amount of Each Receipt this Period

576.90

P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

690.90

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Brandon W Quindt**

Mailing Address 10661 South 204th St

City State Zip Code  
 Gretna NE 68028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Operations Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR12070118328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Guru Gurushankar**

Mailing Address 6188 Memorial Drive

City State Zip Code  
 Dublin OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, GM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR120701218328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. David M Mitchell**

Mailing Address 222 West 14th Street 4B

City State Zip Code  
 New York NY 10011

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Marketing Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR122644918328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

228.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 124

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Reginald Thevenot**

Mailing Address 3 Dustin Court

City

Mansfield

State

MA

Zip Code

02048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Operations Mgmt

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR122694718328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Richard G Fullenkamp**

Mailing Address 8975 Portofino Place

City

Dublin

State

OH

Zip Code

43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Regulatory Mgmt

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR122694818328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Dennis W Sevin**

Mailing Address 1342 White Oak Ct.

City

North Huntingdon

State

PA

Zip Code

15642

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Director, EH&amp;S

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR122779718328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

171.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Stephen S Norris**

Mailing Address 207 King Ct

City  
Bullard

State  
TX

Zip Code  
75757

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Manufacturing Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR122779918328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Garvin P Prescod**

Mailing Address 101 Braebank Ln

City

Bryn Mawr

State

PA

Zip Code

19010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Director, EH&S

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR122787618328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Jennifer R Ferrang**

Mailing Address Cardinal Health  
100 Raritan Center Parkway

City

Lebanon

State

NJ

Zip Code

08833

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Direct Sales Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR122787718328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

228.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Thomas C Novelli**

Mailing Address 6486 Sutcliffe Drive

City  
Alexandria

State Zip Code  
VA 22315

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR122840618328**

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Scott J Wagner**

Mailing Address 7504 Breezy Lake Lane

City  
Flowery Branch

State Zip Code  
GA 30542

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, Transportation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR124937418328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Jeffrey J Easterling**

Mailing Address 965 Wessington Manor Lane

City  
Fort Mill

State Zip Code  
SC 29715

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, GM Cust Analytics Solutions

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR124937518328**

Amount of Each Receipt this Period

90.00

P/R Deduction (\$30.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

280.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. Theron B Neese**

Mailing Address 4855 Spring Park Cir

City State Zip Code  
 Suwanne GA 30024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, Account Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2015

**Transaction ID : PR124937618328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. Michael A Gates**

Mailing Address 1212 Brionne Court

City State Zip Code  
 Waxhaw NC 28173

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, Operations Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2015

**Transaction ID : PR124937818328**

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. Ryan K Cox**

Mailing Address 639 NW Fremont St

City State Zip Code  
 Camas WA 98607

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, Territory Sales (Lab)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2015

**Transaction ID : PR124937918328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

288.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 124

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Stephen M Mason**

Mailing Address 6544 Brodie Blvd

City	State	Zip Code
Dublin	OH	43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, GM Kinray

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR124938018328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Robert D Wagner**

Mailing Address 8844 Tartan Fields Drive

City	State	Zip Code
Dublin	OH	43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Strategic Sourcing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR124938118328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**c. Nancy Hula-Mills**

Mailing Address 8581 The Island

City	State	Zip Code
Memphis	TN	38125

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Sales (Enterprise Contractin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR124938418328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

285.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Luis E Garcia**

Mailing Address 5263 SW 152 Avenue

City State Zip Code  
 Miramar FL 33027

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, Nuclear Pharmacy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR124938518328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Daniel C Stelter**

Mailing Address 130 N GARLAND CT APT 4902

City State Zip Code  
 Chicago IL 60602

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, Intell Property (Atty)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR124938618328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Stefan Grunwald**

Mailing Address 9982 Allen Drive

City State Zip Code  
 Dublin OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 SVP, Strategic Sourcing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR124938718328**

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

273.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Kevin Taylor**

Mailing Address 1835 Glenn Avenue

City

Upper Arlington

State

OH

Zip Code

43212

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Product or Services Mktg

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR124938818328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Max J Friedauer**

Mailing Address 1554 Heatherwae Loop

City

Powell

State

OH

Zip Code

43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Strategic Pricing

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR124938918328**

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. David T Zimpfer**

Mailing Address 6916 Corazon Drive

City

Dublin

State

OH

Zip Code

43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Info Services & Analytics

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR124939018328**

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

234.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 124

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Ronald A Schultz**

Mailing Address 1209 East Cork Street

City

Kalamazoo

State

MI

Zip Code

49001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Quality Assurance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR124939118328**

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Helene U Godat**

Mailing Address 3601 Harvard Ave

City

Highland Park

State

TX

Zip Code

75205

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Product or Services Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR124939318328**

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Cynthia M Davidson**Mailing Address 1350 N. Western Ave  
#103

City

Lake Forest

State

IL

Zip Code

60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Sales Operations Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR124983718328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

339.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 124

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Steven B Sanford**

Mailing Address 905 CR 3131

City  
JacksonvilleState  
TX  
Zip Code  
75766FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INCOccupation  
VP, Manufacturing Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR124983818328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Stacy A Butterfield**

Mailing Address 5151 Woodbridge Dr

City  
PowellState  
OH  
Zip Code  
43065FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INCOccupation  
SVP, Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR124984218328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Thomas E Burke**

Mailing Address 21 Parsons Drive

City  
SwampscottState  
MA  
Zip Code  
01907FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INCOccupation  
SVP/GM Innovative Delivery Solut

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR124984318328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

228.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 124

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. John W Kilgour

Mailing Address PO Box 764

43 Fellows Rd.

City

Ipswich

State

MA

Zip Code

01938

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Direct Sales Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2015

Transaction ID : PR124984418328

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Benjamin E Stormer

Mailing Address 498 Greenglade Avenue

City

Worthington

State

OH

Zip Code

43085

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Technical Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2015

Transaction ID : PR124984518328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mark S Mitchell

Mailing Address 76 Tranquil Trail

City

Dunlap

State

TN

Zip Code

37327

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Territory Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2015

Transaction ID : PR124984618328

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

285.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 21 OF 124  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Teresa A Stentz**

Mailing Address 2249 Sheringham Road

City	State	Zip Code
Upper Arlington	OH	43220

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Inventory Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR124984918328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Cynthia L Adkins**

Mailing Address 8374 Daventry Court

City	State	Zip Code
Powell	OH	43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Strategic Plng/Execution

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR124985118328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Brent E Stutz**

Mailing Address 8176 Crossgate Court N

City	State	Zip Code
Dublin	OH	43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, Commercial Technologies

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR124985218328**

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

321.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. James E Barnett**

Mailing Address 7657 Kestrel Way W

City State Zip Code  
Dublin OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Asc Gen Csl, Corp/Secur

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

MM / DD / YYYY  
07 / 31 / 2015

**Transaction ID : PR124985318328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Jeffrey R Bennett**

Mailing Address 2266 Dauer Court

City State Zip Code  
Powell OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

MM / DD / YYYY  
07 / 31 / 2015

**Transaction ID : PR124985418328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Aaron R Lewis**

Mailing Address 175 Coachman Dr

City State Zip Code  
Plain City OH 43064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Compliance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

MM / DD / YYYY  
07 / 31 / 2015

**Transaction ID : PR124985618328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

228.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 124

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Michele L Conway**

Mailing Address 4902 Longbenton Way

City State Zip Code  
 Dublin OH 43017

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Mgr, Fin Plng &amp; Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR124985818328

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. John M Adams**

Mailing Address 3800 Beecham Ct.

City State Zip Code  
 Columbus OH 43220

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, Associate General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR124985918328

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. William Rozich**

Mailing Address 9926 MacDonald Drive

City State Zip Code  
 Dublin OH 43017

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, HR Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR124986018328

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

309.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 124  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Stephanie R Revish**

Mailing Address 4304 Hickory Rock Dr

City State Zip Code  
Powell OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, Fin Plng & Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2015

**Transaction ID : PR124986118328**

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Frederick P Jenny**

Mailing Address 5013 straits link

City State Zip Code  
New Albany OH 43054

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, Software Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2015

**Transaction ID : PR124986318328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Peter M Hoeft**

Mailing Address 7000 Cardinal Place

City State Zip Code  
Galena OH 43021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
Sr Proj Mgr, Bus Integration

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2015

**Transaction ID : PR124986418328**

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

249.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 124

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. Eric Myers

Mailing Address 8410 Russett Ct

City State Zip Code  
 Westerville OH 43082

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Asc Gen Csl, Labor/Employ

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR124986518328

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Thomas M Pelizza

Mailing Address 34 Sassinoro Drive

City State Zip Code  
 Putnam Valley NY 10579

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Territory Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR124987218328

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Michael J Rothstein

Mailing Address 33 Todd Ct

City State Zip Code  
 Huntington Station NY 11746

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Territory Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR124987318328

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

342.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 26 OF 124  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Cynthia A Sackett**

Mailing Address 6393 Pebblecreek Dr

City	State	Zip Code
Independence	OH	44131

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Ethics &amp; Compliance Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR124987418328**

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Christopher G Lindroth**

Mailing Address 91 Prescott Dr

City	State	Zip Code
Hudson	OH	44236

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, GM Edgepark

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

766.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR124987518328**

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Kurt R Packer**

Mailing Address 86 Brandywine Dr

City	State	Zip Code
Hudson	OH	44236

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, GM CAH at Home

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR124987618328**

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

345.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 OF 124

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Michael B Petras**

Mailing Address 3591 West Galloway

City State Zip Code  
 Richfield OH 44286

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Pres, GM CAH at Home

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR124987818328

Amount of Each Receipt this Period

300.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Kevin E Gehrt**

Mailing Address 7439 Merion Ct

City State Zip Code  
 Solon OH 44139

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, HR Business Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR124988018328

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Andrew L Hinkle**

Mailing Address 321 Simon Rd

City State Zip Code  
 Hudson OH 44236

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Contract and Billing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR124988118328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

471.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 124

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Steven A Eisenberg**

Mailing Address 35590 Michael Dr

City State Zip Code  
 Solon OH 44139

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, Comm/Trans (Atty)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR124988218328

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Paul R Gotti**

Mailing Address 9960 Concord Rd

City State Zip Code  
 Dublin OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, Nuclear Pharmacy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR124988418328

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Eileen Lehmann**

Mailing Address 8585 Pennington Ct

City State Zip Code  
 Powell OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 Dir, Internal Communications

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR124989018328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

285.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 29 OF 124

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Thomas D Dardis**

Mailing Address 4023 James River Road

City

New Albany

State

OH

Zip Code

43054

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Operations Mgmt

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2015

**Transaction ID : PR124989418328**

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Rebecca A Hellmann**

Mailing Address 1717 Doone Rd

City

Columbus

State

OH

Zip Code

43221

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Marketing Mgmt

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2015

**Transaction ID : PR124989818328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Jeffrey W Lovesy**

Mailing Address 720 W. Diana

City

Phoenix

State

AZ

Zip Code

85021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Direct Sales Mgmt

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2015

**Transaction ID : PR124989918328**

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

207.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 30 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Steven H Cohen**

Mailing Address 2945 Surrey Lane

City

Weston

State

FL

Zip Code

33331

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR124990118328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. JoAnna M Shore**

Mailing Address 6570 Wooded View Dr.

City

Hudson

State

OH

Zip Code

44236

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Direct Sales Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.62

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR124990318328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Marino Colatruglio**

Mailing Address 4500 Clark Shaw Rd

City

Powell

State

OH

Zip Code

43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Facilities & RE Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR125269318328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

285.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 31 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Mark F Stauffer**

Mailing Address 7000 Cardinal Place

City State Zip Code  
Dublin OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
**CARDINAL HEALTH, INC**

Occupation  
VP, Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR125269418328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. William J Taylor**

Mailing Address 770 HeartlandMeadows

City State Zip Code  
Sunbury OH 43074

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
**CARDINAL HEALTH, INC**

Occupation  
Mgr, Marketing Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR125269518328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Vernon E Elliott**

Mailing Address 414 Mill Wood Blvd.

City State Zip Code  
Marysville OH 43040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
**CARDINAL HEALTH, INC**

Occupation  
Sr Engr, IT Client Sys Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR125269718328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

228.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 32 OF 124

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Melanie C Filas**

Mailing Address 1409 Riverwood Lane

City	State	Zip Code
Powell	OH	43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Compensation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR125270018328**

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Richard D Kirkland**

Mailing Address 571 Birch Street

City	State	Zip Code
Westerville	OH	43082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Talent Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR125270218328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Edward Daniels**

Mailing Address 3832 Dennis Rd

City	State	Zip Code
New Holland	OH	43145

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Ethics and Compliance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR129786818328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

189.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 124

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. Kristin R Harper

Mailing Address 5732 Rocky Shore Drive

City State Zip Code  
 Lewis Center OH 43035

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Marketing Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR129786918328

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Steven Briggs

Mailing Address 10070 Brookfield Dr.

City State Zip Code  
 Concord OH 44060

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, GM Category Mgmt CAH at Home

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR129787018328

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Michael C Kuo

Mailing Address 1810 Ravenel Lane

City State Zip Code  
 Sugar Land TX 77479

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Pharmacy Operations Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR130000018328

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

264.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 34 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Rosario J Lazzaro**

Mailing Address 74 South Street

City

State

Zip Code

Cresskill

NJ

07626

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Director, Pharmacy

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

304.00

Date of Receipt

07 / 31 / 2015

Transaction ID : PR130084618328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Jorge M Gomez**

Mailing Address 8028 Holyrood Court

City

State

Zip Code

Dublin

OH

43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, Finance

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

320.00

Date of Receipt

07 / 31 / 2015

Transaction ID : PR130358218328

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. John P Sullivan**

Mailing Address 7101 Robertson Court

City

State

Zip Code

Dublin

OH

43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Strategy Mgmt

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

304.00

Date of Receipt

07 / 31 / 2015

Transaction ID : PR130358318328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

174.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 35 OF 124  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Eli G Phillips**

Mailing Address 4895 Vicksburg Ln

City	State	Zip Code
Hilliard	OH	43026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Regulatory Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR130358418328**

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Kathryn G Reeves**

Mailing Address 3933 Farber Court

City	State	Zip Code
New Albany	OH	43054

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, Enterprise Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR130720018328**

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Phyllis J Jarrett**

Mailing Address 30 Cape Cod

City	State	Zip Code
Irvine	CA	92620

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Direct Sales Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR130810918328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

339.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 36 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. Mark A Contardo**

Mailing Address 2 Cardinal Drive

City State Zip Code  
 Franklin MA 02038

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, Direct Sales Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

**Transaction ID : PR130811218328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. David J Testa**

Mailing Address 1107 Lytton Ln

City State Zip Code  
 Matthews NC 28104

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, Direct Sales Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

**Transaction ID : PR130811518328**

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. Tracy Howard**

Mailing Address 6464 Greenstone Loop

City State Zip Code  
 Dublin OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, Strategic Plng/Execution

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

**Transaction ID : PR130811918328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

303.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 37 OF 124

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Lori G Walker**

Mailing Address 6909 New Albany Links Drive

City	State	Zip Code
New Albany	OH	43054

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Strategic Plng/Execution

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR130812018328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. William Fitzgerald**

Mailing Address 1925 River Sound Dr.

City	State	Zip Code
Knoxville	TN	37922

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Territory Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR130812218328**

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Tina G Lantz**

Mailing Address 307 E Beck St

City	State	Zip Code
Columbus	OH	43206

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Sales Operations Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR130812418328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

303.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 38 OF 124  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Robert E Schlissberg**

Mailing Address 7816 Alexandra Dr

City	State	Zip Code
Hudson	OH	44236

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Territory Sales CAH at Home

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR130812918328

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Michael J Glending**

Mailing Address 36422 Gosford Dr

City	State	Zip Code
Avon	OH	44011

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Territory Sales CAH at Home

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR130813218328

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Ryan D Schorr**

Mailing Address 243 Stone Canyon Ct

City	State	Zip Code
Hinckley	OH	44233

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Account Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR130813318328

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

342.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 39 OF 124  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Kristin A Gibbs**

Mailing Address 240 Grey Fox Run

City	State	Zip Code
Chagrin Falls	OH	44022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Marketing Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR130813418328**

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Matthew P Dambeck**

Mailing Address 705 Santa Maria Dr.

City	State	Zip Code
Tierra Verde	FL	33715

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Sales (Wound Care)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR130814118328**

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. John D Crowley**

Mailing Address 2523 Titans Lane

City	State	Zip Code
Brentwood	TN	37027

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Sales Operations Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR130814818328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

264.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 40 OF 124

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Steven D Light**

Mailing Address 4249 Vaux Link

City

New Albany

State

OH

Zip Code

43054

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Product or Services Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				3	1			2	0	1	5	

**Transaction ID : PR130814918328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Russell M Williamson**

Mailing Address 5009 Glenshire Drive

City

Flower Mound

State

TX

Zip Code

75028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, GM Enterprise Corporate Acco

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				3	1			2	0	1	5	

**Transaction ID : PR130815218328**

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. William G Wiley**

Mailing Address 3063 Pecan Grove Lane

City

Prosper

State

TX

Zip Code

75078

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Operations Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				3	1			2	0	1	5	

**Transaction ID : PR130815518328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

378.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 41 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Rhonda D Hoffman**

Mailing Address 303 Coal Bend

City  
Delaware

State  
OH

Zip Code  
43015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, GM Retail

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

07 / 31 / 2015

Transaction ID : PR130815618328

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Michael F Pintek**

Mailing Address 4510 W. Rapid Springs.

City  
Austin

State  
TX

Zip Code  
78746

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Account Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

07 / 31 / 2015

Transaction ID : PR130815718328

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Frank Cracolici**

Mailing Address 571 Aguajito Road

City  
Carmel

State  
CA

Zip Code  
93923

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, GM Enterprise Corporate Acco

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

07 / 31 / 2015

Transaction ID : PR130815918328

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 42 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Jan E Nielsen**

Mailing Address 4408 Pecan Bend

City State Zip Code  
Parker TX 75002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, Product or Services Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR130839918328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. James G Banigan**

Mailing Address 3128 Callander

City State Zip Code  
The Colony TX 75056

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, Product or Services Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR130863418328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Shaden Marzouk**

Mailing Address 251 Daniel Burnham Square  
Unit 404

City State Zip Code  
Columbus OH 43215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
SVP, Clinical Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR130884818328**

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 43 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Mark L Lieberman**

Mailing Address 11 Cherry Hill Lane

City State Zip Code  
 Manalapan NJ 07726

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, Direct Sales Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR130967918328**

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Heather M O'Sullivan**

Mailing Address 94 Kettle Hole Road

City State Zip Code  
 Bolton MA 01740

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, Clinical Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR130968018328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Paul R Leodler**

Mailing Address Varies By Worker

City State Zip Code  
 Silverdale WA 98383

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 Director, Security

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR78006118328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

231.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 44 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Robert F Glover**

Mailing Address 5633 N Kostner Avenue

City State Zip Code  
Chicago IL 60646

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Account (Enterprise Contrac

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR87377418328**

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Mark R Overman**

Mailing Address 900 Wyndham Hill Ct

City State Zip Code  
Southlake TX 76092

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Account (Enterprise Contract

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

723.20

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR87377718328**

Amount of Each Receipt this Period

135.60

P/R Deduction (\$45.20 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**c. Linda S Lockyer**

Mailing Address 1133 Noe Street

City State Zip Code  
San Francisco CA 94114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Account (Enterprise Contrac

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR87377818328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

324.60

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 45 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Christopher D Kerski**

Mailing Address 8155 Campden Lakes Boulevard

City State Zip Code  
Dublin OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, GM Laboratory Products

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

07 / 31 / 2015

Transaction ID : PR87378618328

Amount of Each Receipt this Period

120.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Mark T Henderson**

Mailing Address 11300 Glenwood Street

City State Zip Code  
Shawnee KS 66226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Direct Sales Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.64

Date of Receipt

07 / 31 / 2015

Transaction ID : PR87378718328

Amount of Each Receipt this Period

55.62

P/R Deduction (\$18.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Kathy S Popejoy**

Mailing Address 11127 W 59th Ave

City State Zip Code  
Arvada CO 80004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Operations Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.60

Date of Receipt

07 / 31 / 2015

Transaction ID : PR87379418328

Amount of Each Receipt this Period

80.55

P/R Deduction (\$26.85 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

256.17

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 OF 124

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Christopher J Anderson**

Mailing Address 3600 George Pierce

City State Zip Code  
 Suwanee GA 30024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, QRA Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR87379918328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Brad Wilson**

Mailing Address 30121 Fiddlers Green

City State Zip Code  
 Farmington Hills MI 48334

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Account Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR87380118328

Amount of Each Receipt this Period

40.50

P/R Deduction (\$13.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Douglas J Katz**

Mailing Address 20 McCue Rd

City State Zip Code  
 Morganville NJ 07751

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Direct Sales Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR87380218328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

154.50

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 47 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. David B Render**

Mailing Address 6909 Maris Ct

City

Burleson

State

TX

Zip Code

76028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Operations Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.48

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR87380918328**

Amount of Each Receipt this Period

45.09

P/R Deduction (\$15.03 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. James A Whidden**

Mailing Address 10 Cherry Lane

City

Chester

State

NY

Zip Code

10918

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Regulatory Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR87381018328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Robert M Randklev**

Mailing Address 4708 Meandering Way

City

Colleyville

State

TX

Zip Code

76034

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, HSS Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR87381118328**

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

162.09

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 48 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Geoffrey Y McMahon**

Mailing Address 57-531 Kamehameha Hwy

City State Zip Code  
 Kahuku HI 96731

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Operations Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR87381218328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Benjamin T Thompson**

Mailing Address 2029 Lewis Crossing Court

City State Zip Code  
 Keller TX 76248

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Direct Sales Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR87381418328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Laurel Beeler**

Mailing Address 1723 Eagle Trl

City State Zip Code  
 Oxford MI 48371

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Exec, Account

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR87382018328**

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

246.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 49 OF 124

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Daniel L Swanberg**

Mailing Address 3648 Tierra Paris

City

El Paso

State

TX

Zip Code

79938

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Engineering Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87382218328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Michael L Groesbeck**

Mailing Address 33916 N Summerfields Dr

City

Gurnee

State

IL

Zip Code

60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, QRA Medical

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87382318328**

Amount of Each Receipt this Period

120.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Debra L Schotz**

Mailing Address 2351 Thornwood Avenue

City

Wilmette

State

IL

Zip Code

60091

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, GM Perioperative Products

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87382718328**

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

327.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 50 OF 124  
(check only one)

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<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Gregg A Brewster**

Mailing Address 3710 Fenceline Road

City	State	Zip Code
Franksville	WI	53126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Account (Enterprise Contrac

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR87382818328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Michele B Donatich**

Mailing Address 520 Penny Lane

City	State	Zip Code
Grayslake	IL	60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Cust Advocacy-Clinical

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR87383018328

Amount of Each Receipt this Period

43.74

P/R Deduction (\$14.58 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Greg W Storm**

Mailing Address Varies By Worker

City	State	Zip Code
Little Rock	AR	72223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Exec, Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR87383418328

Amount of Each Receipt this Period

96.03

P/R Deduction (\$32.01 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

196.77

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 51 OF 124

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Stephen A Inacker**

Mailing Address 1471 Firwood Ct.

City

Marco Island

State

FL

Zip Code

34145

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Pres, Hospital Sales and Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

641.76

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87383518328**

Amount of Each Receipt this Period

120.33

P/R Deduction (\$40.11 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Wilfrido M Sosa**

Mailing Address 721 Live Oak

City

El Paso

State

TX

Zip Code

79932

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, Manufacturing (Medical Prod

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87384118328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Susan J Jacobson**Mailing Address 65 East Monroe  
#4606

City

Chicago

State

IL

Zip Code

60603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87384518328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

291.33

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 OF 124

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Robert B Hobgood**

Mailing Address 215 N. Pine Street  
Unit 3906

City State Zip Code  
Charlotte NC 28202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
Dir, Account Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 31 2015

Transaction ID : PR87384618328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Evelyn Long**

Mailing Address 3333 Hawks Ridge Dr

City State Zip Code  
Lakeland FL 33810

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
Dir, Operations Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 31 2015

Transaction ID : PR87384818328

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Kate C Spirko**

Mailing Address 6812 Spruce Pine Dr

City State Zip Code  
Columbus OH 43235

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
Dir, HR Service Center

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 31 2015

Transaction ID : PR87385118328

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

231.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 OF 124

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Rachel R Stoll**

Mailing Address 4228 St. Andrews Blvd

City State Zip Code  
 Irving TX 75038

FEC ID number of contributing federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, Direct Sales Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR87385318328

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Stacy Septer**

Mailing Address 18 Miller Drive

City State Zip Code  
 Sylacauga AL 35151

FEC ID number of contributing federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 Dir, Direct Sales Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR87385618328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Paul S Pogue**

Mailing Address 1174 Greers Landing Dr

City State Zip Code  
 Hernando MS 38632

FEC ID number of contributing federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 Dir, Product or Services Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR87386018328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

228.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 54 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. Danny W Penny**

Mailing Address 27 N Lake Ave

City State Zip Code  
 Third Lake IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 Dir, Packaging Engr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

**Transaction ID : PR87386418328**

Amount of Each Receipt this Period

19.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. Mark Misplay**

Mailing Address 4007 Chelsea Green East

City State Zip Code  
 New Albany OH 43054

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, Account Mgmt (Ambulatory)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

**Transaction ID : PR87386618328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. Matthew J Kohut**

Mailing Address 809 East Rockland Rd

City State Zip Code  
 Libertyville IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 SVP, Product & Services Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

**Transaction ID : PR87386718328**

Amount of Each Receipt this Period

39.00

P/R Deduction (\$13.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

115.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 55 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Curtis L Wilens**

Mailing Address 1347 Coventry Ln

City

Northbrook

State

IL

Zip Code

60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Market Research

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR87386818328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Scott A Donnelly**

Mailing Address 12659 Hickory Ridge Road

City

Plain City

State

OH

Zip Code

43064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Marketing Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR87387518328**

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Robert Moulton**

Mailing Address 7017 Violet Veil

City

Dublin

State

OH

Zip Code

43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Fin Plng & Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR87387618328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

174.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 56 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. Stephen Reardon**

Mailing Address 9098 Mediterra Place

City State Zip Code  
 Dublin OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, QRA Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

**Transaction ID : PR87387818328**

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. Paul G Farley**

Mailing Address 52 Onondaga Rd

City State Zip Code  
 Narragansett RI 02882

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, Account

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

**Transaction ID : PR87388018328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. Daniel Bishop**

Mailing Address 9712 Persimmon Place

City State Zip Code  
 Plain City OH 43064

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 Dir, Fin Plng & Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

**Transaction ID : PR87388218328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

174.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 OF 124

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Patrick J Eckhart**

Mailing Address 2600 Deseret Dr

City

Powell

State

OH

Zip Code

43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Sourcing Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87388318328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Rene Bloch**

Mailing Address 401 Spring Drive

City

Yorktown Heights

State

NY

Zip Code

10598

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Exec, Territory Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87388418328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Annlea C Rumfola**

Mailing Address 10472 Mackenzie Way

City

Dublin

State

OH

Zip Code

43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Software Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87388518328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

285.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 58 OF 124  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. John A Fiacco**

Mailing Address 124 Fox Haven Drive

City	State	Zip Code
O'Fallon	MO	63368

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Pharm Ops Mgmt - Med Shop

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87388618328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Michael D Synor**

Mailing Address 31772 Fairway Dr N

City	State	Zip Code
Foristell	MO	63348

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Territory Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87388818328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. James W Bonanni**

Mailing Address 7511 Plum Hollow Cir

City	State	Zip Code
Liverpool	NY	13090

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Account (Enterprise Contrac

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87388918328**

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

231.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 OF 124  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Eric D Sutherland**

Mailing Address 6433 Tulipwood Lane

City State Zip Code  
 Jamesville NY 13078

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Operations Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

**Transaction ID : PR87389018328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Kristina M Robinson**

Mailing Address 5464 Heathrow Drive

City State Zip Code  
 Powell OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Software Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

**Transaction ID : PR87389118328**

Amount of Each Receipt this Period

48.45

P/R Deduction (\$16.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Andre D Smith**

Mailing Address 1327 Lake Grayson Drive

City State Zip Code  
 Katy TX 77494

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Pharm Ops & Account Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

**Transaction ID : PR87389318328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

162.45

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 60 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Ted L DiBiase**

Mailing Address 4954 Rosegate Court

City State Zip Code  
Dublin OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
**CARDINAL HEALTH, INC**

Occupation  
VP, Org Health & Lab Rel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

979.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR87389418328**

Amount of Each Receipt this Period

183.60

P/R Deduction (\$61.20 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Joshua T Gaines**

Mailing Address 2629 Bexley Park Road

City State Zip Code  
Bexley OH 43209

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
**CARDINAL HEALTH, INC**

Occupation  
SVP, Strategy & Corp Devel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR87389618328**

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Stephen Flannery**

Mailing Address 275 East Center St

City State Zip Code  
Shavertown PA 18708

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
**CARDINAL HEALTH, INC**

Occupation  
VP, Account (Government)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR87389818328**

Amount of Each Receipt this Period

66.39

P/R Deduction (\$22.13 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

399.99

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 61 OF 124

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Charles Aquilina**

Mailing Address 4871 Normandy Drive

City	State	Zip Code
Galena	OH	43021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Product or Services Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87389918328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Robert S Summers**

Mailing Address 146 Chasely Circle

City	State	Zip Code
Powell	OH	43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Product or Services Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.28

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87390518328**

Amount of Each Receipt this Period

93.99

P/R Deduction (\$31.33 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Natasha C Nicol**

Mailing Address 35 Red Tail Hawk Loop

City	State	Zip Code
Pawleys Island	SC	29585

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Clinical Spec - Pharm Sol

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87390618328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

207.99

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 OF 124

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. Sean M McCaffrey

Mailing Address 1020 Buck Run Rd

City

Southpointe

State

PA

Zip Code

15317

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Operations Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

Transaction ID : PR87390718328

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Deborah E Wolin

Mailing Address 44 Lake Mist Drive

City

Sugar Land

State

TX

Zip Code

77479

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Asc Gen Csl, Comm/Trans

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

Transaction ID : PR87390818328

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Steven J Callison

Mailing Address 1368 Lincoln Road

City

Columbus

State

OH

Zip Code

43212

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Software Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

Transaction ID : PR87390918328

Amount of Each Receipt this Period

59.73

P/R Deduction (\$19.91 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

233.73

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 63 OF 124

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Ronald M Wadsworth**

Mailing Address 4310 Suffolk Way

City

El Dorado Hills

State

CA

Zip Code

95762

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Operations Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87391018328**

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Gary G Cacciatore**

Mailing Address 1330 Enclave Parkway

City

Houston

State

TX

Zip Code

77059

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Regulatory (Atty)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

573.91

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87391918328**

Amount of Each Receipt this Period

90.00

P/R Deduction (\$30.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Richard F Colley**

Mailing Address 2903 21st Ave Ct Se

City

Puyallup

State

WA

Zip Code

98372

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Exec, Account

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87392018328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

192.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 64 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. James L Scott**

Mailing Address 9318 Pratulina Villa Drive

City State Zip Code  
Dublin OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
**CARDINAL HEALTH, INC**

Occupation  
SVP, National Markets

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 31 2015

**Transaction ID : PR87392218328**

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Bradley G Cochran**

Mailing Address 2589 Aikin Circle S

City State Zip Code  
Lewis Center OH 43035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
**CARDINAL HEALTH, INC**

Occupation  
VP, Account

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 31 2015

**Transaction ID : PR87392418328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. William Owad**

Mailing Address 7558 Heatherwood Ln

City State Zip Code  
Dublin OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
**CARDINAL HEALTH, INC**

Occupation  
SVP, Operational Excellence

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1604.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 31 2015

**Transaction ID : PR87392518328**

Amount of Each Receipt this Period

300.90

P/R Deduction (\$100.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

564.90

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 65 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. Lisa A Stillings**

Mailing Address 5833 Whitecraigs Ct

City State Zip Code  
 Dublin OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Fin Plng & Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

**Transaction ID : PR87392918328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. Jeffrey B Brannon**

Mailing Address 3965 Clearlake Circle

City State Zip Code  
 Zanesville OH 43701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Account

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

**Transaction ID : PR87393018328**

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. Craig P Cowman**

Mailing Address 6851 Killilea Drive

City State Zip Code  
 Dublin OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

EVP, Global Sourcing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

**Transaction ID : PR87393118328**

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

282.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 66 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Lori S Havlovitz**

Mailing Address 8969 Sunningdale Lane

City State Zip Code  
Dublin OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, IT Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR87393218328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Tracy K Godfrey**

Mailing Address 1491 Polaris Parkway  
# 175

City State Zip Code  
Columbus OH 43240

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
Dir, Strategic Pricing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR87393318328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Mark D Zawadzki**

Mailing Address 5991 Kitchen Ct

City State Zip Code  
Hilliard OH 43026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, Fin Plng & Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR87393418328**

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

174.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 OF 124

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Margaret M LaValle**

Mailing Address 6810 Vineyard Haven Loop

City	State	Zip Code
Dublin	OH	43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, HR Services Integration

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR87393518328

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Joseph S Hodge**

Mailing Address 2260 Gnarled Pine Drive

City	State	Zip Code
Dublin	OH	43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Exec, Account

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR87393618328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Michael C Kaufmann**

Mailing Address 7160 Temperance Point St

City	State	Zip Code
Westerville	OH	43082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3076.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

Transaction ID : PR87393818328

Amount of Each Receipt this Period

576.90

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

783.90

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 OF 124

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Gregory Boggs**

Mailing Address 7746 Polo Lane

City State Zip Code  
 Powell OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Software Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR87393918328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Angela M Thomas**

Mailing Address 9287 Windy Creek Dr

City State Zip Code  
 Columbus OH 43240

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Field Service

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR87394018328

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Laura L Smith**

Mailing Address 5828 Ivy Branch Dr

City State Zip Code  
 Dublin OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Sales Operations Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR87394618328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

174.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 69 OF 124

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Kevin M Kannally**

Mailing Address 14529 Robinson Rd

City

State

Zip Code

Plain City

OH

43064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Operations Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87394718328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Dana R Thacker**

Mailing Address 2934 Griffin Dr

City

State

Zip Code

Lewis Center

OH

43035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Software Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87394818328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. James P Combs**

Mailing Address 69259 Lee Road

City

State

Zip Code

St Clairsville

OH

43950

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Exec, Account

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87394918328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

228.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 OF 124

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Michael P Kennedy**

Mailing Address 4783 Vista Ridge Dr

City State Zip Code  
 Dublin OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 SVP, Compliance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1604.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR87395018328

Amount of Each Receipt this Period

300.90

P/R Deduction (\$100.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Carolyn E Grant**

Mailing Address 6869 Meadow Glen Dr

City State Zip Code  
 Westerville OH 43082

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 Dir, Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR87395418328

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Kristina J Kallmeyer**

Mailing Address 275 Clearsprings Drive

City State Zip Code  
 Springboro OH 45066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, Account (Enterprise Contrac

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR87395518328

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

474.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 71 OF 124  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Troy L Hanson**

Mailing Address 5622 Dorsey Drive

City	State	Zip Code
Columbus	OH	43235

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Product or Services Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

749.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87395818328**

Amount of Each Receipt this Period

140.46

P/R Deduction (\$46.82 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Patrick A Sells**

Mailing Address 3460 Hyatts Rd

City	State	Zip Code
Powell	OH	43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, HR Business Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87396118328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Cassandra E Baker**

Mailing Address 1751 Barrington Rd

City	State	Zip Code
Upper Arlington	OH	43221

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1112.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87396418328**

Amount of Each Receipt this Period

208.53

P/R Deduction (\$69.51 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

405.99

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 72 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. James M Barker**

Mailing Address 2761 Skelton Ln

City State Zip Code  
Blacklick OH 43004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, Strategic Sourcing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

584.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2015

**Transaction ID : PR87396618328**

Amount of Each Receipt this Period

109.68

P/R Deduction (\$36.56 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. James J Homan**

Mailing Address 520 Eden Park Drive

City State Zip Code  
Franklin TN 37067

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
Exec, Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.72

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2015

**Transaction ID : PR87396718328**

Amount of Each Receipt this Period

41.76

P/R Deduction (\$13.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Stephen T Falk**

Mailing Address 2175 Lane Rd

City State Zip Code  
Columbus OH 43220

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
EVP & General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2015

**Transaction ID : PR87396818328**

Amount of Each Receipt this Period

300.00

P/R Deduction (\$100.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

451.44

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 73 OF 124  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Carole S Watkins**

Mailing Address 1967 Woodlands Place

City	State	Zip Code
Powell	OH	43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Chief Human Resources Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3076.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87397218328**

Amount of Each Receipt this Period

576.90

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Mary C Scherer**

Mailing Address 223 Weatherburn Ct

City	State	Zip Code
Powell	OH	43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Internal Audit-Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87397318328**

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Jon Giacomini**

Mailing Address 6792 Ingalls Ct

City	State	Zip Code
Galena	OH	43021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

CEO, Pharmaceutical Segment

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87397418328**

Amount of Each Receipt this Period

225.00

P/R Deduction (\$75.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

846.90

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 74 OF 124

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Anne F McCluskey**

Mailing Address 10910 E San Tan Blvd

City

Sun Lakes

State

AZ

Zip Code

85248

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Clinical Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87397618328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Robert Giacalone**

Mailing Address 7471 Balfoure Circle

City

Dublin

State

OH

Zip Code

43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, Reg Affairs/Chf Reg Cnsl

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87397818328**

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Debra A Fluno**

Mailing Address 622 Sunnyside Ave

City

Gurnee

State

IL

Zip Code

60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Pharm Ops &amp; Account Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87398018328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

264.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 75 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Michael D Brown**

Mailing Address 3103 Saddle Ridge

City  
Richmond

State  
TX

Zip Code  
77406

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Pharm Ops & Account Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

07 / 31 / 2015

Transaction ID : PR87398218328

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Jacqueline A Gleason**

Mailing Address N 7896 Valley View Rd

City

New Glarus

State

WI

Zip Code

53574

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Program Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

07 / 31 / 2015

Transaction ID : PR87398718328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Anthony D Woo**

Mailing Address 6151 Haddo Way

City

Dublin

State

OH

Zip Code

43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, Corp Devel, Fin Anl/Val

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

07 / 31 / 2015

Transaction ID : PR87398818328

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

231.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 OF 124

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Kathryn J Ableidinger**

Mailing Address 34 Ashbury Ct

City

Hudson

State

WI

Zip Code

54016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Operations Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

Transaction ID : PR87399018328

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Daniel R Robinson**

Mailing Address 8124 Crooked Oaks Ct

City

Gainesville

State

VA

Zip Code

20155

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Pharm Ops &amp; Account Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

Transaction ID : PR87399118328

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Stephen M Lawrence**

Mailing Address 4868 Carrigan Ridge

City

Dublin

State

OH

Zip Code

43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, Retail Independent Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

Transaction ID : PR87399218328

Amount of Each Receipt this Period

300.00

P/R Deduction (\$100.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

528.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 OF 124

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Gordon A Crawford**

Mailing Address 8735 Richards Rd.

City State Zip Code  
Utica OH 43080

FEC ID number of contributing federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
Dir, IT Prog/Proj Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 31 2015

Transaction ID : PR87399318328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. David Lawrence**

Mailing Address 326 Vinwood Lane

City State Zip Code  
Powell OH 43065

FEC ID number of contributing federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, Strategic Plng/Execution

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 31 2015

Transaction ID : PR87399418328

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Stuart Martin**

Mailing Address 9723 Turquoise Ln

City State Zip Code  
Brentwood TN 37027

FEC ID number of contributing federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
Dir, Operations Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 31 2015

Transaction ID : PR87399718328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

264.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 78 OF 124

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Lawrence Malham**

Mailing Address 206 Lone Oak Drive

City

White House

State

TN

Zip Code

37188

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Territory Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87399818328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. John E Howard**

Mailing Address 2230 River Forest Drive

City

Mobile

State

AL

Zip Code

36605

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Sr Cnslt, Franchise Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87400118328**

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. David E Gajeski**

Mailing Address 21406 Saunton Dr.

City

Katy

State

TX

Zip Code

77450

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87400318328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

216.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 OF 124

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Kendell F Sherrer**

Mailing Address 500 South Parkview Avenue  
Suite 305

City State Zip Code  
Bexley OH 43209

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Benefits

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 31 2015

Transaction ID : PR87400818328

Amount of Each Receipt this Period

60.93

P/R Deduction (\$20.31 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Gary B Ellis**

Mailing Address 6146 Balmoral Drive

City State Zip Code  
Dublin OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

EVP, Enterprise Corporate Account

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1123.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 31 2015

Transaction ID : PR87400918328

Amount of Each Receipt this Period

300.90

P/R Deduction (\$100.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Eric M Norman**

Mailing Address 7170 Kingscote Ct.

City State Zip Code  
Dublin OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 31 2015

Transaction ID : PR87401018328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

418.83

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 OF 124  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Leeann Evensen**

Mailing Address 1423 Shady Valley

City State Zip Code  
 Sugar Land TX 77479

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Sr Cnslt, Bus Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2015

**Transaction ID : PR87401118328**

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Theresa R Gould**

Mailing Address 3418 Big Hickory Dr.

City State Zip Code  
 Kingwood TX 77345

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, HR Business Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2015

**Transaction ID : PR87401318328**

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Tina M Stavinoha**

Mailing Address 125 Arrow Road

City State Zip Code  
 Eagle Lake TX 77434

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Learning Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2015

**Transaction ID : PR87401418328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

177.00

**TOTAL** This Period (last page this line number only)..... ►

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 81 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC

Full Name (Last, First, Middle Initial)

**A. Connie Woodburn**

Mailing Address 9761 Erin Woods Dr

City State Zip Code  
Dublin OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
SVP, Prof & Govt Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2160.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

Transaction ID : PR87401518328

Amount of Each Receipt this Period

405.00

P/R Deduction (\$135.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Robbie D Jorgensen**

Mailing Address 578 Morts Drive

City State Zip Code  
Wentzville MO 63385

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
Dir, Operations Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

Transaction ID : PR87401618328

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Brian Worth**

Mailing Address 5654 Rothesay Drive

City State Zip Code  
Dublin OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
SVP, HR Business Partner Pharma

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

Transaction ID : PR87401918328

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

669.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 82 OF 124  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. David S Olson**

Mailing Address 126 Marina Dr

City	State	Zip Code
Bullard	TX	75757

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Pharm Ops &amp; Account Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87402318328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Eric C Christensen**

Mailing Address 8624 Greenarbor Rd

City	State	Zip Code
Albuquerque	NM	87122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Asc Gen Csl, Comm/Trans

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87402418328**

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Raymond Grotzinger**

Mailing Address 0836 SW Curry St # 102

City	State	Zip Code
Portland	OR	97239

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Pharmacy Support

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87402718328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

189.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 83 OF 124

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. David M Ellis**

Mailing Address 6521 Goya Way

City

El Dorado Hills

State

CA

Zip Code

95762

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Product or Services Mktg

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87402918328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Blair R Williams**

Mailing Address 7000 Cardinal Place

City

Westerville

State

OH

Zip Code

43081

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, HR Management

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87403118328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Andrew R Keller**

Mailing Address PO Box 3732

City

Dublin

State

OH

Zip Code

43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Strategic Plng/Execution

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87403318328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

285.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 84 OF 124

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Eric M Johnson**

Mailing Address 8078 Trail Lake Dr

City

Powell

State

OH

Zip Code

43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Fin Plng &amp; Analysis

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87404018328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Donna B Mann**

Mailing Address 6666 McVey Blvd

City

West Worthington

State

OH

Zip Code

43235

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Prgm Dir, Prog/Proj Mgmt

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

457.60

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87404218328**

Amount of Each Receipt this Period

85.80

P/R Deduction (\$28.60 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Kevin Harry**

Mailing Address 3003 Breezewood Ln

City

Galena

State

OH

Zip Code

43021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Fin Plng &amp; Analysis

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87404518328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

256.80

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 85 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. Lauren E Fields**

Mailing Address 4316 Oak Wood Court

City State Zip Code  
 Dublin OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Sales Operations Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

**Transaction ID : PR87404618328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. Marc D DeLorenzo**

Mailing Address 231 Tiller Drive

City State Zip Code  
 Powell OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Territory Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

**Transaction ID : PR87404918328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. Eric T Bolling**

Mailing Address 13162 Thornton Drive

City State Zip Code  
 Frisco TX 75035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Territory Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

**Transaction ID : PR87405418328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

228.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 OF 124

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. Mary W Baxter

Mailing Address 3273 Stapleford Chase

City State Zip Code  
 Virginia Beach VA 23452

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Pharm Ops &amp; Account Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR87405518328

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Kimberly A Robinette

Mailing Address 9409 Avemore Ct.

City State Zip Code  
 Dublin OH 43017

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Finance Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR87405718328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Paul T Buster

Mailing Address 66 W Beechwood Blvd

City State Zip Code  
 Columbus OH 43214

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Software Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR87405918328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

228.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 87 OF 124

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Cameron J Brady**Mailing Address 873 N. Larrabee St.  
Unit 210

City	State	Zip Code
Chicago	IL	60610

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Exec, Account

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87406218328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Scott Wolff**Mailing Address 1400 Waukegan Road  
Dutch Schmidt Bldg

City	State	Zip Code
Chicago	IL	60618

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Deployment Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87406518328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Brian K Singleton**

Mailing Address 2521 East 31st Street

City	State	Zip Code
Tulsa	OK	74105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Territory Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87406618328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

171.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 OF 124

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. John S Lindsey

Mailing Address 50 Timberknoll Loop

City State Zip Code  
 Powell OH 43065

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, Enterprise Infrastructure

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR87406718328

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Craig C Baranski

Mailing Address 12 Massina Dr

City State Zip Code  
 Wheeling WV 26003

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Operations Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR87406818328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. James E Bach

Mailing Address 133 Station Park Circle

City State Zip Code  
 Graylake IL 60030

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Inventory Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR87406918328

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

285.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 89 OF 124

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Brian R Buss**

Mailing Address 7483 Bardston Drive

City	State	Zip Code
Dublin	OH	43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Software Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87407018328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Robert M Gabel**

Mailing Address 1605 Berlin Station Rd

City	State	Zip Code
Delaware	OH	43015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Risk Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87407118328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Harry Bedgood**

Mailing Address 4852 McNulty Street

City	State	Zip Code
Grove City	OH	43123

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Operations Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87407418328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

171.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 90 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. John J Byrnes**

Mailing Address 161 Tucker Dr

City

Worthington

State

OH

Zip Code

43085

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Tax Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR87407618328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Andrew Grant**

Mailing Address 9440 Nicholson way

City

Dublin

State

OH

Zip Code

43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Account

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR87407718328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Kenneth H Robinette**

Mailing Address 9409 Avemore Ct.

City

Dublin

State

OH

Zip Code

43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Deployment Leader

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR87407818328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

285.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 91 OF 124

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Donald S Luchini**

Mailing Address 212 Lakeside Drive

City State Zip Code  
 McKees Rocks PA 15136

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 Dir, Fin Plng & Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR87408218328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Dennis W Braun**

Mailing Address 5667 Medallion Dr West

City State Zip Code  
 Westerville OH 43082

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 SVP, Finance Medical

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR87408318328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Jeffrey E Greer**

Mailing Address 1570 Cambridge Blvd

City State Zip Code  
 Marble Cliff OH 43212

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, Enterprise Architecture

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR87408618328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

171.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 92 OF 124

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. **Amelia D McCarty**

Mailing Address 5864 Lakeview Dr

City

Hilliard

State

OH

Zip Code

43026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Regulatory (Atty)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2015

Transaction ID : PR87408718328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. **James W Hillman**

Mailing Address 141 Woodstream Dr

City

Grand Island

State

NY

Zip Code

14072

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Direct Sales Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2015

Transaction ID : PR87409018328

Amount of Each Receipt this Period

90.00

P/R Deduction (\$30.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. **Colleen Greiner**

Mailing Address PO Box 51057

City

Myrtle Beach

State

SC

Zip Code

29579

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Exec, Account

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2015

Transaction ID : PR87409118328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

204.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 93 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Gregory J Halvacs**

Mailing Address 7402 Overland Trail

City State Zip Code  
 Delaware OH 43015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, Corporate Security

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

**Transaction ID : PR87409418328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Michael A Mone'**

Mailing Address 4909 Scenic Creek Dr

City State Zip Code  
 Powell OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Asc Gen Csl, Regulatory

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

**Transaction ID : PR87409518328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Michael A Duffy**

Mailing Address 729 Mohawk Street

City State Zip Code  
 Columbus OH 43206

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Pres, Med Consumables

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

**Transaction ID : PR87409618328**

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

231.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 94 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Stanley L Nagel**

Mailing Address 6486 Ballantrae Place

City State Zip Code  
Dublin OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, HR Business Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR87409718328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Martha Huston**

Mailing Address 490 E. Sunburst Ln

City State Zip Code  
Tempe AZ 85284

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

President/CEO Canada

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR87410118328**

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Lisa Marling George**

Mailing Address 9334 Pradolino Villa Dr.

City State Zip Code  
Dublin OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Talent Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR87410218328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

321.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 95 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Andrew T Alderman**

Mailing Address 1225 Leicester Pl.

City State Zip Code  
Columbus OH 43235

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, Strategy & Bus Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2015

**Transaction ID : PR87410518328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Shelley A Bird**

Mailing Address 7998 Caraway Ave

City State Zip Code  
Dublin OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

EVP, Office of the CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2015

**Transaction ID : PR87410618328**

Amount of Each Receipt this Period

300.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Robert S Thompson**

Mailing Address 8338 Amberleigh Way

City State Zip Code  
Dublin OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Strategic Plng/Execution

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2015

**Transaction ID : PR87410718328**

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

489.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 96 OF 124

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Andrew W Wehr**

Mailing Address 905 Little Bear Loop

City

Lewis Center

State

OH

Zip Code

43035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Director, EH&amp;S

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87410818328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Ronald Brown**

Mailing Address 7417 NewAlbanyLinkDr

City

New Albany

State

OH

Zip Code

43054

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Operations Mgmt

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87410918328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. ISMAEL VILLARREAL**

Mailing Address 5032 CALLE TINTILLO

City

GUAYNABO

State

PR

Zip Code

00966

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, OPERATIONS MGMT

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87411018328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

228.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 97 OF 124

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. David R Dion**

Mailing Address 182 N Flora Parkway

City State Zip Code  
 Addison IL 60101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 Dir, Quality Control

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR87411118328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Maureen T Girard**

Mailing Address 552 Ridgeside Drive

City State Zip Code  
 Golden CO 80401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, Marketing Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR87411418328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Jessica L Mayer**

Mailing Address 4852 Carrigan Ridge

City State Zip Code  
 Dublin OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, Comm/Trans (Atty)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2015

Transaction ID : PR87411718328

Amount of Each Receipt this Period

90.00

P/R Deduction (\$30.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

204.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 98 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. Stuart G Laws**

Mailing Address 5635 Cypress Court

City State Zip Code  
 Westerville OH 43082

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 SVP, Chief Accounting Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2015

**Transaction ID : PR87412018328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. Bonny Fowler**

Mailing Address 214 Cherry Street

City State Zip Code  
 Granville OH 43023

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, Comm Business Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2015

**Transaction ID : PR87412318328**

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. Anne Marie La Bue**

Mailing Address 1877 Tewksbury Rd

City State Zip Code  
 Upper Arlington OH 43221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, Asc Gen Csl, Corp/Secur

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2015

**Transaction ID : PR87412418328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

189.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 99 OF 124

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. Carl E Hall

Mailing Address 33 Tanglin Road

#08-10 St Regis Residences

City

Singapore

State

ZZ

Zip Code

99999

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Territory Sales (Asia)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2015

Transaction ID : PR87412518328

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Sanjeeth Pai

Mailing Address 367 Cedar Trace

City

Xenia

State

OH

Zip Code

45385

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Pharm Strat Sourcing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2015

Transaction ID : PR87413518328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Christine L Bentley

Mailing Address 12283 South Parker Street

City

Olathe

State

KS

Zip Code

66061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir Mangng Cnslt, Reg Sciences M

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2015

Transaction ID : PR87413618328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

159.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 100 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Joseph A Gottron**

Mailing Address 874 Aylesbury Drive

City State Zip Code  
Gahanna OH 43230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, Pharmaceutical Segment IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2015

**Transaction ID : PR87413918328**

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Jeffrey A Crist**

Mailing Address 9376 Roseta Villa Drive

City State Zip Code  
Dublin OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, IT Network

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2015

**Transaction ID : PR87414218328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Samer Abdul-Samad**

Mailing Address 6271 Belvedere Green Blvd

City State Zip Code  
Dublin OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2015

**Transaction ID : PR87415018328**

Amount of Each Receipt this Period

45.00

P/R Deduction (\$15.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

162.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 101 OF 124

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Dianne Radigan**

Mailing Address 900 Eastchester Dr

City	State	Zip Code
Gahanna	OH	43230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Community Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87415118328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Sally J Curley**

Mailing Address 9035 Esin Court

City	State	Zip Code
Powell	OH	43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, Investor Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87415218328**

Amount of Each Receipt this Period

225.00

P/R Deduction (\$75.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. George S Barrett**

Mailing Address 246 E. Sycamore St.

City	State	Zip Code
Columbus	OH	43206

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Chairman/CEO, Cardinal Health

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3076.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87415318328**

Amount of Each Receipt this Period

576.90

P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

915.90

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 102 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. Mark Pilkington**

Mailing Address 8191 Hillingdon Drive

City State Zip Code  
Powell OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, Strategy Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2015

**Transaction ID : PR87415818328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. Craig Morford**

Mailing Address 5565 Lake Shore Ave,

City State Zip Code  
Westerville OH 43082

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
Chief Legal/Compliance Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3076.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2015

**Transaction ID : PR87415918328**

Amount of Each Receipt this Period

576.90

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. Tohid A Vahedian**

Mailing Address 1857 Collingswood Rd

City State Zip Code  
Columbus OH 43221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
SVP, GM Med Svcs & Solutions

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2015

**Transaction ID : PR87416318328**

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

765.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 103 OF 124  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Michael J Mangione**

Mailing Address 10733 Jones Road

City	State	Zip Code
Clarence	NY	14031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Territory Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87416418328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Eric J Perla**

Mailing Address 15426 Court Amber TI

City	State	Zip Code
Cypress	TX	77433

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Territory Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87416518328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Sean P Waters**

Mailing Address 4505 East Broadway

City	State	Zip Code
Gilbert	AZ	85296

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Sr. Dir, Chem/Pharma Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87417118328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

171.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 104 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Henry M Chilton**

Mailing Address 32 Palisades Parkway

City State Zip Code  
Oak Ridge TN 37830

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR87417218328**

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. William S Claunch**

Mailing Address 10744 Campden Lakes Blvd

City State Zip Code  
Dublin OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
Dir, QRA Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR87417318328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**c. Luke C Augustine**

Mailing Address 10834 S 166th St

City State Zip Code  
Omaha NE 68136

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR87417418328**

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

414.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 105 OF 124

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Katherine A Benson**

Mailing Address 3410 Nobb Hill Dr

City State Zip Code  
Hudsonville MI 49426

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
**CARDINAL HEALTH, INC**

Occupation  
Dir, Nuclear Pharmacy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR87417518328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Carroll B B Callicott**

Mailing Address 8050 Lesia Drive

City State Zip Code  
Denham Springs LA 70706

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
**CARDINAL HEALTH, INC**

Occupation  
Mgr, Nuclear Pharmacy - Area

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR87417818328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Joseph E Lukacs**

Mailing Address 18 Village Grove Rd

City State Zip Code  
Little Rock AR 72211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
**CARDINAL HEALTH, INC**

Occupation  
Dir, Nuclear Pharmacy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR87418118328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

171.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 106 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Marc B Mullen**

Mailing Address 1650 Sherborne Lane

City State Zip Code  
Powell OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, GM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR87418518328**

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Wayne J Boudreaux**

Mailing Address 7328 Trade Court

City State Zip Code  
Bradenton FL 34212

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
Dir, Nuclear Pharmacy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR87418818328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Craig Rothman**

Mailing Address 42 Seminole Way

City State Zip Code  
Short Hills NJ 07078

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, Account (Enterprise Contrac

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR87418918328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

264.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 107 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Michael A Marusa**

Mailing Address 1755 Woodledge Drive

City State Zip Code  
 State College PA 16803

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, Accounts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

**Transaction ID : PR87419118328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Anita Anderson**

Mailing Address 27341 Dakota Ave.

City State Zip Code  
 Elko MN 55020

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 Exec, Account

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

**Transaction ID : PR87419418328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Cathy Chenetski**

Mailing Address 5734 Ennishannon Place

City State Zip Code  
 Dublin OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, QRA Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

**Transaction ID : PR87419618328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

171.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 108 OF 124

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Alfredo S Russo**

Mailing Address 18 Manchester Court

City

Columbus

State

NJ

Zip Code

08022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Regulatory Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87420118328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. David K Orensten**

Mailing Address 2341 Bryden Road

City

Bexley

State

OH

Zip Code

43209

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Litigation (Atty)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87420218328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Richard W Watson**

Mailing Address PO Box 991

City

Sumner

State

WA

Zip Code

98390

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Operations Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87420318328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

171.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 109 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. Rogelio A Armino**

Mailing Address 4000 Kenwood Dr.

City State Zip Code  
 Flower Mound TX 75022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 Dir, Master Black Belt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2015

**Transaction ID : PR87420418328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. Eleanor M Daufenbach**

Mailing Address 2029 W. Lane Avenue

City State Zip Code  
 Columbus OH 43221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 Dir, Marketing Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2015

**Transaction ID : PR87420518328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. Patricia Morrison**

Mailing Address 55 East Erie  
 #3801

City State Zip Code  
 Chicago IL 60611

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 EVP Customer Care Shared Service

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3076.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2015

**Transaction ID : PR87420618328**

Amount of Each Receipt this Period

576.90

P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

690.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 110 OF 124

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Gilberto Quintero**

Mailing Address 6650 Brodie Blvd

City	State	Zip Code
Dublin	OH	43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, QRA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87421218328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Colin Hatch**

Mailing Address 1351 Noe Bixby Road

City	State	Zip Code
Columbus	OH	43232

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87421518328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Lane Cheramie**

Mailing Address 152 West 117th Street

City	State	Zip Code
Cut Off	LA	70345

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Health System Pharmacy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : PR87421618328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

285.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 111 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Douglas Helmreich**

Mailing Address 6600 Deeside Dr.

City State Zip Code  
Dublin OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
**CARDINAL HEALTH, INC**

Occupation  
Dir, Market Research

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR87421718328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Robert J Doone**

Mailing Address 6119 Peppergrass Court

City State Zip Code  
Westerville OH 43082

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
**CARDINAL HEALTH, INC**

Occupation  
VP, Integrated Logistics Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR87422218328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Jeffrey P Ledbetter**

Mailing Address 6700 Ridpath Road

City State Zip Code  
Grove City OH 43123

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
**CARDINAL HEALTH, INC**

Occupation  
Cnslt, Account

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR87422318328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

171.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 112 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Michelle M Zaluzney**

Mailing Address 15435 Eagle Tavern Lane

City State Zip Code  
 Centreville VA 20120

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Exec, Territory Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR87422418328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Meghan Fitzgerald**

Mailing Address 6 Morgan

City State Zip Code  
 Norwalk CT 06851

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

EVP, Strategy and Health Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR87422818328**

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Marsha L Aragon**

Mailing Address 27126 Highlands Ln

City State Zip Code  
 Valencia CA 91354

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Operations Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

07 / 31 / 2015

**Transaction ID : PR87422918328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

264.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 113 OF 124

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Daniel Movens**

Mailing Address 678 Woodland Bayou Drive

City

Santa Rosa Beach

State

FL

Zip Code

32459

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP GM, Telesales and Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87423118328**

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Stephen J Medve**

Mailing Address 8153 Timble Falls Drive

City

Dublin

State

OH

Zip Code

43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Talent Acquisition

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87423318328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Richard Montgomery**

Mailing Address 2717 Queen Elaine Drive

City

Lewisville

State

TX

Zip Code

75056

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Technical Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	5		

**Transaction ID : PR87423718328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

264.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 114 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. Ramon Gregory**

Mailing Address 9003 Mediterra Place

City State Zip Code  
Dublin OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, Customer Service

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2015

**Transaction ID : PR87423918328**

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. Nicholas Augustinos**

Mailing Address 2416 15th Street

City State Zip Code  
San Francisco CA 94114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, Health Info & Strategy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2015

**Transaction ID : PR87424118328**

Amount of Each Receipt this Period

300.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. Robert A Honner**

Mailing Address 7167 Springview Ln

City State Zip Code  
Dublin OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, Fin Plng & Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2015

**Transaction ID : PR93409118328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

432.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 115 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Cathy Mock**

Mailing Address 5440 York Lane North

City State Zip Code  
Columbus OH 43232

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Supplier Diversity

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

07 / 31 / 2015

Transaction ID : PR93409218328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Kelly B Wilson**

Mailing Address 7000 Cardinal Place

City State Zip Code  
Dublin OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, HR Business Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

07 / 31 / 2015

Transaction ID : PR93689218328

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Jyothirmayi Cherry**

Mailing Address 5136 Abbotsbury Court

City State Zip Code  
New Albany OH 43054

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

Dir, Fin Plng & Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

07 / 31 / 2015

Transaction ID : PR93938818328

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

228.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 116 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Debbie J Mitchell**

Mailing Address 9 Alban Mews

City State Zip Code  
New Albany OH 43054

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
SVP, Corporate Communications

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR94089918328**

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Eusebio Zamora**

Mailing Address 9450 Tartan Ridge Blvd

City State Zip Code  
Dublin OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
Dir, Pharmacy Support

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR94090018328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Donald M Casey**

Mailing Address 7708 Tillinghast Drive

City State Zip Code  
Dublin OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
CEO, Medical Segment

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3076.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : PR94134318328**

Amount of Each Receipt this Period

576.90

P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

783.90

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 117 OF 124

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Shauna M Latshaw**

Mailing Address 6069 Tournament Drive

City State Zip Code  
 Westerville OH 43082

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, Software Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

MM / DD / YYYY  
 07 / 31 / 2015

**Transaction ID : PR99505118328**

Amount of Each Receipt this Period

114.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. Alan L Deutschendorf**

Mailing Address 8243 Worley Dr.

City State Zip Code  
 Lewis Center OH 43035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, Deployment Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

MM / DD / YYYY  
 07 / 31 / 2015

**Transaction ID : PR99505218328**

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. Sean C Raynak**

Mailing Address 200 Mallard Drive

City State Zip Code  
 Monroeville PA 15146

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 Dir, Pharm Ops Mgmt - Non-rph

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

MM / DD / YYYY  
 07 / 31 / 2015

**Transaction ID : PR99563118328**

Amount of Each Receipt this Period

57.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

231.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 118 OF 124

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Ge Cao**

Mailing Address 5360 Fort Ward Drive

City State Zip Code  
 New Albany OH 43054

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, Info Services & Analytics

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2015

**Transaction ID : PR99977518328**

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

75.00

33737.78

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 119 OF 124

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Larson For Congress**

Mailing Address PO Box 261172

City Hartford	State CT	Zip Code 06126
------------------	-------------	-------------------

Purpose of Disbursement  
Direct Contribution

011

Candidate Name

**Rep. John Larson**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CT District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		08		2015

**Transaction ID : 9299980**

Amount of Each Disbursement this Period

2000.00
---------

Direct Contribution

Full Name (Last, First, Middle Initial)

**B. Dold For Congress**

Mailing Address PO Box 6312

City Libertyville	State IL	Zip Code 60048
----------------------	-------------	-------------------

Purpose of Disbursement  
Direct Contribution

011

Candidate Name

**Rep. Robert Dold**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		08		2015

**Transaction ID : 9299981**

Amount of Each Disbursement this Period

2000.00
---------

Direct Contribution

Full Name (Last, First, Middle Initial)

**C. Pallone for Congress**

Mailing Address PO Box 3176

City Long Branch	State NJ	Zip Code 07740
---------------------	-------------	-------------------

Purpose of Disbursement  
Direct Contribution

011

Candidate Name

**Rep. Frank Pallone Jr.**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NJ District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		08		2015

**Transaction ID : 9299982**

Amount of Each Disbursement this Period

5000.00
---------

Direct Contribution

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

9000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 120 OF 124

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Anna Eshoo for Congress**

Mailing Address 555 Capitol Mall, Suite 1425

City	State	Zip Code
Sacramento	CA	95814

Purpose of Disbursement  
Direct Contribution

011

Candidate Name

**Rep. Anna G. Eshoo**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 18

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2015

**Transaction ID : 9305371**

Amount of Each Disbursement this Period

2000.00
---------

Direct Contribution

Full Name (Last, First, Middle Initial)

**B. Kevin McCarthy for Congress**

Mailing Address 213 Ashby St.

City	State	Zip Code
Alexandria	VA	22305

Purpose of Disbursement  
Direct Contribution

011

Candidate Name

**Rep. Kevin McCarthy**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 23

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2015

**Transaction ID : 9305372**

Amount of Each Disbursement this Period

5000.00
---------

Direct Contribution

Full Name (Last, First, Middle Initial)

**C. Friends of Erik Paulsen**Mailing Address P.O. Box 44369  
250 Prairie Center Drive

City	State	Zip Code
Eden Prairie	MN	55344

Purpose of Disbursement  
Direct Contribution

011

Candidate Name

**Rep. Erik P. Paulsen**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MN District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2015

**Transaction ID : 9305373**

Amount of Each Disbursement this Period

5000.00
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Direct Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

12000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 121 OF 124

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Guthrie for Congress**

Mailing Address PO Box 9639

City	State	Zip Code
Bowling Green	KY	42102

Purpose of Disbursement  
Direct Contribution

Candidate Name

**Rep. Brett Guthrie**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: KY District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2015

**Transaction ID : 9305374**

Amount of Each Disbursement this Period

1500.00
---------

Direct Contribution

Full Name (Last, First, Middle Initial)

**B. Diane Black For Congress**

Mailing Address PO Box 1437

City	State	Zip Code
Gallatin	TN	37066

Purpose of Disbursement  
Direct Contribution

Candidate Name

**Ms. Diane Black**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TN District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2015

**Transaction ID : 9305375**

Amount of Each Disbursement this Period

2500.00
---------

Direct Contribution

Full Name (Last, First, Middle Initial)

**C. Jim Jordan for Congress**

Mailing Address 1709 State Route 560 South

City	State	Zip Code
Urbana	OH	43078

Purpose of Disbursement  
Direct Contribution

Candidate Name

**Rep. Jim Jordan**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2015

**Transaction ID : 9305376**

Amount of Each Disbursement this Period

2000.00
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Direct Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 122 OF 124

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Collins For Congress**

Mailing Address PO Box 386

City Clarence	State NY	Zip Code 14031
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Purpose of Disbursement  
Direct Contribution

Candidate Name

**Rep. Christopher Collins**

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: NY	District: 27

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		16		2015

**Transaction ID : 9320715**

Amount of Each Disbursement this Period

1000.00
---------

Direct Contribution

Full Name (Last, First, Middle Initial)

**B. Whitfield for Congress**

Mailing Address 499 South Capitol Street SW Ste 42

City Washington	State DC	Zip Code 20003
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Purpose of Disbursement  
Void - Whitfield for Congress

Candidate Name

**Rep. Edward Whitfield**

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: KY	District: 01

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		17		2015

**Transaction ID : 9324420**

Amount of Each Disbursement this Period

-1000.00
----------

Void - Whitfield for Congress

Full Name (Last, First, Middle Initial)

**C. Ratcliffe For Congress**Mailing Address 2931 Ridge Road, Suite 101  
Pmb #217

City Rockwall	State TX	Zip Code 75032
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Purpose of Disbursement  
Direct Contribution

Candidate Name

**Rep. John Ratcliffe**

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: TX	District: 04

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2015

**Transaction ID : 9341123**

Amount of Each Disbursement this Period

2000.00
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Direct Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 123 OF 124

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Friends Of Jason Chaffetz**

Mailing Address 315 Westfield Circle

City

State

Zip Code

Alpine

UT

84004

Purpose of Disbursement

Direct Contribution

011

Candidate Name

**Rep. Jason Chaffetz**Category/  
Type

Office Sought:



House



Senate



President

Disbursement For: 2016



Primary



General



Other (specify) ▼

State: UT

District: 03

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015**Transaction ID : 9341124**

Amount of Each Disbursement this Period

2500.00

Direct Contribution

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:



House



Senate



President

Disbursement For:



Primary



General



Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:



House



Senate



President

Disbursement For:



Primary



General



Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2500.00

31500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 124 OF 124

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC AKA Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Sam Olens for Attorney General**

Mailing Address 57 Waddell St

City Marietta	State GA	Zip Code 30060
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Purpose of Disbursement  
Sam Olens, ATTORNEY GENERAL GA

Candidate Name

**Sam Olens**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	30	/	2015

**Transaction ID : 9341125**

Amount of Each Disbursement this Period

1000.00
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Sam Olens, ATTORNEY GENERAL GA

Full Name (Last, First, Middle Initial)

**B. Marty Jackley for Attorney General**Mailing Address 1302 East Hwy 14  
Suite 1

City Pierre	State SD	Zip Code 57501
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Purpose of Disbursement  
Marty Jackley, ATTORNEY GENERAL SD

Candidate Name

**Marty Jackley**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	30	/	2015

**Transaction ID : 9341126**

Amount of Each Disbursement this Period

1000.00
---------

Marty Jackley, ATTORNEY GENERAL SD

Full Name (Last, First, Middle Initial)

**C. Sean Reyes for Attorney General**

Mailing Address 32 West 200 South #1

City Salt Lake City	State UT	Zip Code 84101
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Purpose of Disbursement  
Sean Reyes, ATTORNEY GENERAL UT

Candidate Name

**Sean Reyes**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : 9341145**

Amount of Each Disbursement this Period

1000.00
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Sean Reyes, ATTORNEY GENERAL UT

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00
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3000.00
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